

SEPT 19

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEV.

In re: Maak Engel

Case No. 19-20646 / MBK

Reporting Period: SEPT 2019

MONTHLY OPERATING REPORT

File with Court and submit copy to United States Trustee within 20 days after end of month.

Submit copy of report to any official committee appointed in the case.

REQUIRED DOCUMENTS		Form No.	Document Attached	Explanation Attached	Affidavit/Supplement Attached
Schedule of Cash Receipts and Disbursements		MOR-1			
Bank Reconciliation (or copies of debtor's bank reconciliations)		MOR-1a	✓		
Schedule of Professional Fees Paid		MOR-1b			
Copies of bank statements			✓		
Cash disbursements journals					
Statement of Operations		MOR-2			
Balance Sheet		MOR-3			
Status of Postpetition Taxes		MOR-4			
Copies of IRS Form 6123 or payment receipt					
Copies of tax returns filed during reporting period					
Summary of Unpaid Postpetition Debts		MOR-4			
Listing of aged accounts payable		MOR-4			
Accounts Receivable Reconciliation and Aging		MOR-5			
Debtor Questionnaire		MOR-5			

I declare under penalty of perjury (28 U.S.C. Section 1746) that this report and the attached documents are true and correct to the best of my knowledge and belief.

Signature of Debtor

Date

OCT. 20, 2019

Signature of Joint Debtor

Date

Signature of Authorized Individual*

Date

Printed Name of Authorized Individual

Title of Authorized Individual

*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

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SEP 19

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS

(This Form must be submitted for each Bank Account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-1 (INDV) (CONT)]

	Current Month Actual	Cumulative Filing to Date Actual
Cash - Beginning of Month	-141.61	
RECEIPTS		
Wages (Net)	2,200	
Interest and Dividend Income		
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)		
Total Receipts		
DISBURSEMENTS		
ORDINARY ITEMS:		
Mortgage Payment(s)		
Rental Payment(s)		
Other Secured Note Payments		
Utilities		
Insurance		
Auto Expense	252.63	
Lease Payments		
IRA Contributions		
Repairs and Maintenance		
Medical Expenses	82.36	
Household Expenses	1,744.32	
Charitable Contributions		
Alimony and Child Support Payments		
Taxes - Real Estate		
Taxes - Personal Property		
Taxes - Other (attach schedule)		
Travel and Entertainment	138.42	
Gifts		
Other (attach schedule)		
Total Ordinary Disbursements	2,218.23	
REORGANIZATION ITEMS:		
Professional Fees		
U. S. Trustee Fees	0	
Other Reorganization Expenses (attach schedule)		
Total Reorganization Items		
Total Disbursements (Ordinary + Reorganization)	2,218.23	
Net Cash Flow (Total Receipts - Total Disbursements)		
Cash - End of Month (Must equal reconciled bank statement)	-159.84	



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STATEMENT OF ACCOUNT

2542-FTD01040101119405383



MARK B ENGEL
PERSONAL BANKRUPTCY
CASE 19 20646
40 STEVEN LN
LAKEWOOD NJ 08701-1545

Page: 1 of 4
Statement Period: Sep 11 2019-Oct 10 2019
Cust Ref #: 4363143854-630-T-###
Primary Account #: 436-3143854

TD now accepts Real Time Payments!

We're pleased to announce that TD will soon accept Real Time Payments (RTPs), which means you can receive certain electronic payments sent through RTP almost immediately. This is good news for consumers, businesses, and government agencies who use RTPs. As a TD Customer, you are automatically enrolled. Please be advised that you may not send or receive RTPs on behalf of a person who is not a resident of, or otherwise residing in, the United States. Please visit tdbank.com/RTP to learn more.

TD Convenience Checking

MARK B ENGEL
PERSONAL BANKRUPTCY
CASE 19 20646

Account # 436-3143854

ACCOUNT SUMMARY

Beginning Balance	1,184.98	Average Collected Balance	845.88
Deposits	1,100.00	Interest Earned This Period	0.00
Electronic Deposits	1,023.00	Interest Paid Year-to-Date	0.00
		Annual Percentage Yield Earned	0.00%
Checks Paid	447.60	Days in Period	30
Electronic Payments	1,741.84		
Service Charges	1.00		
Ending Balance	1,117.54		

DAILY ACCOUNT ACTIVITY

Deposits

POSTING DATE	DESCRIPTION	AMOUNT
09/30	DEPOSIT	1,100.00
	Subtotal:	1,100.00

Electronic Deposits

POSTING DATE	DESCRIPTION	AMOUNT
10/10	ACH DEPOSIT, STATE OF N.J. NJSTTAXRFD XXXXX2811	1,023.00
	Subtotal:	1,023.00

Checks Paid

No. Checks: 2

*Indicates break in serial sequence or check processed electronically and listed under Electronic Payments

DATE	SERIAL NO.	AMOUNT
10/04	104	400.00
09/26	107*	47.60

Subtotal: 447.60

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How to Balance your Account

Page:

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Begin by adjusting your account register as follows:

- Subtract any services charges shown on this statement.
- Subtract any automatic payments, transfers or other electronic withdrawals not previously recorded.
- Add any interest earned if you have an interest-bearing account.
- Add any automatic deposit or overdraft line of credit.
- Review all withdrawals shown on this statement and check them off in your account register.
- Follow instructions 2-5 to verify your ending account balance.

1. Your ending balance shown on this statement is:
2. List below the amount of deposits or credit transfers which do not appear on this statement. Total the deposits and enter on Line 2.
3. Subtotal by adding lines 1 and 2.
4. List below the total amount of withdrawals that do not appear on this statement. Total the withdrawals and enter on Line 4.
5. Subtract Line 4 from 3. This adjusted balance should equal your account balance.

1	Ending Balance	1,117.54
2	Total Deposits	+
3	Sub Total	
4	Total Withdrawals	-
5	Adjusted Balance	

2	DEPOSITS NOT ON STATEMENT	DOLLARS	CENTS
	Total Deposits		2

4	WITHDRAWALS NOT ON STATEMENT	DOLLARS	CENTS

	WITHDRAWALS NOT ON STATEMENT	DOLLARS	CENTS
	Total Withdrawals		1

FOR CONSUMER ACCOUNTS ONLY — IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

If you need information about an electronic fund transfer or if you believe there is an error on your bank statement or receipt relating to an electronic fund transfer, telephone the bank immediately at the phone number listed on the front of your statement or write to:

TD Bank, N.A., Deposit Operations Dept, P.O. Box 1377, Lewiston, Maine 04243-1377

We must hear from you no later than sixty (60) calendar days after we sent you the first statement upon which the error or problem first appeared. When contacting the Bank, please explain as clearly as you can why you believe there is an error or why more information is needed. Please include:

- Your name and account number.
- A description of the error or transaction you are unsure about.
- The dollar amount and date of the suspected error.

When making a verbal inquiry, the Bank may ask that you send us your complaint in writing within ten (10) business days after the first telephone call.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will credit your account for the amount you think is in error, so that you have the use of the money during the time it takes to complete our investigation.

INTEREST NOTICE

Total interest credited by the Bank to you this year will be reported by the Bank to the Internal Revenue Service and State tax authorities. The amount to be reported will be reported separately to you by the Bank.

FOR CONSUMER LOAN ACCOUNTS ONLY — BILLING RIGHTS SUMMARY

In case of Errors or Questions About Your Bill:

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us at P.O. Box 1377, Lewiston, Maine 04243-1377 as soon as possible. We must hear from you no later than sixty (60) days after we sent you the FIRST bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights. In your letter, give us the following information:

- Your name and account number.
 - The dollar amount of the suspected error.
 - Describe the error and explain, if you can, why you believe there is an error.
- If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your bill that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

FINANCE CHARGES: Although the Bank uses the Daily Balance method to calculate the finance charge on your Moneyline/Overdraft Protection account (the term "ODP" or "OD" refers to Overdraft Protection), the Bank discloses the Average Daily Balance on the periodic statement as an easier method for you to calculate the finance charge. The finance charge begins to accrue on the date advances and other debits are posted to your account and will continue until the balance has been paid in full. To compute the finance charge, multiply the Average Daily Balance times the Days in Period times the Daily Periodic Rate (as listed in the Account Summary section on the front of the statement). The Average Daily Balance is calculated by adding the balance for each day of the billing cycle, then dividing the total balance by the number of Days in the Billing Cycle. The daily balance is the balance for the day after advances have been added and payments or credits have been subtracted plus or minus any other adjustments that might have occurred that day. There is no grace period during which no finance charge accrues. Finance charge adjustments are included in your total finance charge.

**Bank**

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STATEMENT OF ACCOUNT

MARK B ENGEL
PERSONAL BANKRUPTCY
CASE 19 20646Page: 3 of 4
Statement Period: Sep 11 2019-Oct 10 2019
Cust Ref #: 4363143854-630-T-###
Primary Account #: 436-3143854

DAILY ACCOUNT ACTIVITY

Electronic Payments

POSTING DATE	DESCRIPTION	AMOUNT
09/13	DEBIT CARD PURCHASE, *****30052254091, AUT 091219 VISA DDA PUR WAL MART 2195 HOWELL * NJ	81.88
09/13	DEBIT CARD PURCHASE, *****30052254091, AUT 091219 VISA DDA PUR THE VINEYARD II LAKEWOOD * NJ	10.21
09/16	DEBIT CARD PURCHASE, *****30052254091, AUT 091219 VISA DDA PUR ALDI 60035 HOWELL * NJ	70.06
09/16	DEBIT CARD PURCHASE, *****30052254091, AUT 091219 VISA DDA PUR GOURMET GLATT LAKEWOOD LAKEWOOD * NJ	45.25
09/16	DEBIT POS, *****30052254091, AUT 091519 DDA PURCHASE KEY FOODS 1290 2326 NOS BROOKLYN * NY	29.69
09/18	DEBIT CARD PURCHASE, *****30052254091, AUT 091719 VISA DDA PUR WAL MART 2195 HOWELL * NJ	42.80
09/20	DEBIT CARD PURCHASE, *****30052254091, AUT 091819 VISA DDA PUR NPGS LAKEWOOD * NJ	75.26
09/20	DEBIT CARD PURCHASE, *****30052254091, AUT 091919 VISA DDA PUR SHOPRITE HOWELL S1 HOWELL * NJ	92.48
09/23	DEBIT CARD PURCHASE, *****30052254091, AUT 091919 VISA DDA PUR GOURMET GLATT LAKEWOOD LAKEWOOD * NJ	89.01
09/23	DEBIT CARD PURCHASE, *****30052254091, AUT 092019 VISA DDA PUR AMZN MKTP US AU21146T3 AMZN COM BILL * WA	13.81
09/24	DEBIT CARD PURCHASE, *****30052254091, AUT 092219 VISA DDA PUR JEWISH WORKSHOPS JERUSALEM ISR	18.00
09/24	DEBIT CARD PURCHASE, *****30052254091, AUT 092219 VISA DDA PUR HOSIERY PLUS KENNEDY LAKEWOOD * NJ	35.88
09/24	DEBIT CARD PURCHASE, *****30052254091, AUT 092219 VISA DDA PUR GOURMET GLATT LAKEWOOD LAKEWOOD * NJ	64.80
09/27	DEBIT CARD PURCHASE, *****30052254091, AUT 092519 VISA DDA PUR MARCIA JON CLEANERS JACKSON * NJ	93.00
10/07	DEBIT CARD PURCHASE, *****30052254091, AUT 100319 VISA DDA PUR TORAH TREASURES NJ LAKEWOOD * NJ	25.82
10/07	DEBIT CARD PURCHASE, *****30052254091, AUT 100419 VISA DDA PUR THE VINEYARD II LAKEWOOD * NJ	21.31
10/07	DEBIT CARD PURCHASE, *****30052254091, AUT 100619 VISA DDA PUR LAKEWOOD FAMILY DENTAL LAKEWOOD * NJ	550.00
10/09	DEBIT CARD PURCHASE, *****30052254091, AUT 100819 VISA DDA PUR UHPOA 877 6939095 * FL	129.95
10/10	ACH DEBIT, GEICO PREM COLL 8AZLKQKKTPOE E	252.63
	Subtotal:	1,741.84

Service Charges

POSTING DATE	DESCRIPTION	AMOUNT
10/10	PAPER STATEMENT FEE	1.00
	Subtotal:	1.00

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STATEMENT OF ACCOUNT

MARK B ENGEL
PERSONAL BANKRUPTCY
CASE 19 20646

Page: 4 of 4
Statement Period: Sep 11 2019-Oct 10 2019
Cust Ref #: 4363143854-630-T-###
Primary Account #: 436-3143854

DAILY BALANCE SUMMARY

DATE	BALANCE	DATE	BALANCE
09/10	1,184.98	09/26	468.25
09/13	1,092.89	09/27	375.25
09/16	947.89	09/30	1,475.25
09/18	905.09	10/04	1,075.25
09/20	737.35	10/07	478.12
09/23	634.53	10/09	348.17
09/24	515.85	10/10	1,117.54

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